

Dated: December 2, 1998.  
By direction of the Secretary.

**Donald L. Neilson,**  
Director, Information Management Service.  
[FR Doc. 99-2125 Filed 1-28-99; 8:45 am]  
BILLING CODE 8320-01-P

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0043]

### Agency Information Collection Activities Under OMB Review

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C., 3501 *et seq.*), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

**DATE:** Comments must be submitted on or before March 1, 1999.

**FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT:** Ron Taylor, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, (202) 273-8015 or FAX (202) 273-5981. Please refer to "OMB Control No. 2900-0043."

#### SUPPLEMENTARY INFORMATION:

*Title:* Declaration of Status of Dependents, VA Form 21-686c.  
*OMB Control Number:* 2900-0043.

*Type of Review:* Reinstatement, without change, for a previously approved collection for which approval has expired.

*Abstract:* The form is used to obtain the necessary information to confirm marital status and existence of any dependent child(ren). The information is used by VA to determine eligibility to benefits.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on September 28, 1998 at page 51637.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 56,500 hours.

*Estimated Average Burden Per Respondent:* 15 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 226,000.

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-4650. Please refer to "OMB Control No. 2900-0043" in any correspondence.

Dated: November 23, 1998.

By direction of the Secretary.

**Genie McCully,**

Program Analyst, Information Management Service.

[FR Doc. 99-2112 Filed 1-28-99; 8:45 am]

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## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0060]

### Agency Information Collection Activities Under OMB Review

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C., 3501 *et seq.*), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before March 1, 1999.

**FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT:** Ron Taylor, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, (202) 273-8015 or FAX (202) 273-5981. Please refer to "OMB Control No. 2900-0060."

#### SUPPLEMENTARY INFORMATION:

##### Titles and Form Numbers

- a. Claim for Life Insurance Proceeds (NSLI & USGLI), VA Form 29-4125.
- b. Claim for Monthly Installments (NSLI), VA Form 29-4125a.

c. Claim for One Sum Payment (NSLI & USGLI), VA Form 29-4125b.

d. Claim for Monthly Installments (USGLI), VA Form 29-4125k.

e. Invitation and Claim for One Sum Payment (NSLI & USGLI), VA Form Letter 29-764.

*OMB Control Number:* 2900-0060.

*Type of Review:* Reinstatement, with change, of a previously approved collection for which approval has expired.

*Abstract:* The forms and form letter are used by beneficiaries applying for proceeds of Government Insurance policies. The information is used by VA to process the beneficiaries claim for payment of the insurance proceeds.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on July 13, 1998 at page 37625.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 8,938 hours.

a. VA Form 29-4125—8,200 hours.

b. VA Form 29-4125a—463 hours.

c. VA Form 29-4125b—50 hours.

d. VA Form 29-4125k—125 hours.

e. FL 29-764—100 hours.

#### Estimated Average Burden Per Respondent

a. VA Form 29-4125—6 minutes.

b. VA Form 29-4125a—15 minutes.

c. VA Form 29-4125b—6 minutes.

d. VA Form 29-4125k—15 minutes.

e. FL 29-764—6 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 85,850.

a. VA Form 29-4125—82,000

b. VA Form 29-4125a—1,850

c. VA Form 29-4125b—500

d. VA Form 29-4125k—500

e. FL 29-764—1,000

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-4650. Please refer to "OMB Control No. 2900-0060" in any correspondence.

Dated: November 3, 1998.

By direction of the Secretary.

**Donald L. Neilson,**

Director, Information Management Service.

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